

As below named inventor, I hereby declare that:

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "IMPROVED PERITONEAL DIALYSIS SOLUTIONS WITH POLYPEPTIDES" the specification of which

[] was filed on _____ as
Application Serial No. _____
and was amended on _____
(if applicable)


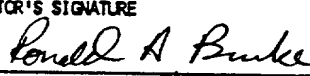

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

Prior Foreign Application(s)			Priority Claimed	
None				
(Number)	(Country)	(Day/Month/Year/Filed)	[]	[]
(Number)	(Country)	(Day/Month/Year/Filed)	[]	[]
(Number)	(Country)	(Day/Month/Year/Filed)	[]	[]

Address all correspondence to Charles R. Mattenson, Baxter International Inc., One Baxter Parkway, Deerfield, Illinois 60015

**COMBINED DECLARATION AND POWER OF ATTORNEY
IN ORIGINAL APPLICATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAMES OF SOLE OR FIRST INVENTOR Leo Martis	INVENTOR'S SIGNATURE 	DATE Dec. 14, 92
RESIDENCE Long Grove, Illinois	CITIZENSHIP India	
POST OFFICE ADDRESS 5524 Oldwood, Long Grove, Illinois 60047		
FULL NAME OF SECOND JOINT INVENTOR, IF ANY Ron Burke	INVENTOR'S SIGNATURE 	DATE 12/14/92
RESIDENCE Arlington Heights, Illinois	CITIZENSHIP U.S.A.	
POST OFFICE ADDRESS 2914 N. Mitchell, Arlington Heights, Illinois 60004		
FULL NAME OF THIRD JOINT INVENTOR, IF ANY Dirk Faict	INVENTOR'S SIGNATURE 	DATE Dec 16, 92
RESIDENCE Assenede, Belgium	CITIZENSHIP Belgium	
POST OFFICE ADDRESS Gravenstraat 1, 9968 Assenede, Belgium		
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		
FULL NAME OF FIFTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		
FULL NAME OF SIXTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		